Fees Received:



Placer County Health and Human Services Department

Jeffrey S. Brown, M.P.H., M.S.W.Department Director

Wesley G. Nicks, R.E.H.S. Environmental Health, Director

PERMIT APPLICATION UNDERGROUND STORAGE TANK - TEMPORARY CLOSURE

Ow ner	Address Phone #
Facility Name	Address Phone #
THE FOLLOWING INFORMA	ATION IS REQUIRED BEFORE A PERMIT CAN BE ISSUED:
 Size of tank(s) and number of Present or past type of mate 	rial stored in tank(s). remove all solids, sludges, and liquids from the tank(s) as per California
which will need to be hat tank material being rem following: a. Approximate amount of was: b. Name of Licensed Hazardous: c. Specific details of how the tax	s Waste Hauler ank material/waste will be handled upon removal from tank. e tank material/waste will be stored and handled prior to
and employees, from all claims, for personal injury, for construct applicant's/permittee's work per shall include the defense and inlaw suits, or judgements as asset	fend, indemnify, and hold harmless Placer County, as it's agents, officers, liability, damages, costs, lawsuits, and judgements for property damage, ction costs or claims which may arise out of or be alleged to relate to formed under a permit. The applicant's/permittee's obligations hereunder demnification of Placer County from any claim, liability, damages, costs, reted by any third party, expressly including any party under contract with my work under this application/permit.
The undersigned has read the coterms of the foregoing requirement	omplete application package, and thereby acknowledges and agree to the ents and statements.

T:\HHS\ENV\AA Haz Mat SW Team\HAZMATFORMS\UST

Date:

Receipt #:

By: